

<First name\_Last name>  
<Address 1>  
<Address 2>  
<City, State ZIP>

<Month day, year>

Dear <First\_name>,

Important changes are coming to your COVID-19 coverage. California's mandatory waiver of member cost sharing for the COVID-19 vaccine, COVID-19 home antigen tests, PCR tests, and COVID-19 drug therapies outside the Kaiser Permanente network will end on November 11, 2023.

Kaiser Permanente is committed to your health, and you can continue to get COVID-19 care at no cost when you visit Kaiser Permanente.<sup>1</sup> That includes up to 8 home antigen tests per member, per month available at Kaiser Permanente pharmacies and through kp.org.<sup>2</sup> Plus, when you visit a Kaiser Permanente facility, your care team can stay up to date on your treatments through your electronic health record, ensuring you get the high-quality, personalized care you deserve.

If you choose to get a COVID-19 vaccine, testing, or drug therapy outside of Kaiser Permanente, you'll be responsible for cost sharing unless these services are delivered as part of covered urgent or emergency care.

You may submit claims to get reimbursed for the costs you pay for services outside the Kaiser Permanente network. Reimbursement could be less than 50% of the cost of the services provided.<sup>3</sup>

To submit a claim, visit kp.org and select "Billing" for further instructions. If you don't have online access, please call the Member Services number on the back of your membership card and ask to have a claim form mailed to you.

For more information about the end of the waiver of member copays, coinsurance, and deductibles for COVID-19 services, please visit **kp.org/covid**. If you have any questions about your coverage, please visit **kp.org/benefits** or call **1-800-464-4000** (TTY **711**).

Thank you for being a Kaiser Permanente member. Your health is our top priority, and we'll continue to work hard to keep you safe and healthy.

<sup>1</sup>Deductibles still apply for members with a high deductible health plan.

<sup>2</sup>COVID-19 over the counter tests provided by the federal government, which are free, do not count towards the 8-test limit.

<sup>3</sup>The amount members are reimbursed will depend on the cost of the out-of-network services provided, the prevailing market rate set by California regulators, any deductible that may need to be met, and other plan limitations, consistent with the terms of your Evidence of Coverage or other plan documents.